

Educating Seniors About New Prescription Drug Benefit is the Key to Its Success -- October 2005

Senator Tom Carper and Congressman Mike Castle

For over 40 years, Medicare has served as the health care backbone for seniors and the disabled. It protects over 40 million beneficiaries by paying for hospitalization and routine doctor visits among other benefits.

Since the creation of Medicare in 1965, there have been discussions of addressing one of its shortcomings -- the lack of outpatient prescription drug coverage. But that's set to change as the new Part D prescription drug plan takes effect on January 1, 2006.

While we consider the new Part D benefit to be a significant and worthy first step toward giving seniors and disabled persons comprehensive drug coverage under Medicare, it's not perfect. Moreover, the upcoming enrollment process may be confusing for many seniors accustomed to traditional Medicare. Education and outreach will be the key to this process.

We will have to work together to ensure that the process goes as smoothly as possible and that Medicare provides seniors with straightforward, easy-to-understand information about the new program, and which specific program might be best for each beneficiary.

Because there will be a variety of drug plans available in Delaware - and each of those plans will vary in cost, specific drugs covered, and pharmacies participating - it is essential that seniors, their families and their caregivers carefully consider their options and understand the deadlines for signing up.

Many Delawareans who have drug coverage from a previous employer should contact them now to see whether their current plan is more generous than what Medicare will offer. If so, they will likely want to keep their current coverage.

On the other hand, seniors with more limited incomes, or those without drug coverage, may find the Medicare benefit to be helpful and decide to enroll.

And seniors with low drug costs but no drug plan might want to consider signing up in one of the cheaper drug plans in order to avoid a penalty for signing up later, should they need coverage because of unanticipated health needs.

Sign-up for the various drug plans will begin November 15th, and continue until May 15th, 2006. But in order for coverage to begin on January 1, 2006, seniors must sign up before December 31, 2005. If seniors are eligible to sign up but wait until after May 15th, 2006, there will a penalty added to monthly premiums - unless seniors were dropped from their employer-sponsored coverage, which was at least as generous as the Medicare benefit.

Before signing up, the first thing that all Medicare beneficiaries should do is to make a list of their current prescriptions - the name of the drugs, dosage frequency and costs. This will help beneficiaries figure out what level of premiums, deductibles, and cost-sharing they can afford, and determine which plans cover the drugs they take.

If seniors have limited assets and income (annual incomes below about \$15,000 for a single person or \$20,000 for a married couple), they may be eligible for a subsidy to help offset the out-of-pocket costs of the new drug plan. To see who qualifies, contact the Social Security Administration (1-800-SSA-1213, <http://www.ssa.gov/>).

Lower-income seniors also may be eligible for Delaware's own Delaware Prescription Assistance Program (DPAP). This program can help to pay for certain cost-sharing not covered by either the benefit or the subsidy provided by the Social Security Administration. To get information about the DPAP, please call 1-800-996-9969, extension 17, or visit online at <http://www.dhss.delaware.gov/dhss/dss/dpap.html> .)

There are several places to go for information about the various drug plans. The Centers for Medicare and Medicaid Services (CMS) oversees the Medicare program and can provide detailed information about the plans available in Delaware. Information has been included in the annual "Medicare & You" handbook that was mailed to beneficiaries this month, and seniors can also visit CMS's website at www.medicare.gov.

Because of the complexity of the plans, it may be necessary to seek out more personalized attention. The best way to do that is to call CMS at 1-800-Medicare, and someone should be able to help figure out which plan, if any, best suits your needs.

Beneficiaries can also contact the various plans directly for information about coverage and cost. Seniors can enroll in the new benefit either through the plans themselves or through CMS at the number and website above.

Other entities are also available to help seniors understand the new benefit. The Delaware Department of Insurance runs Delaware ELDERinfo, which will provide one-on-one assistance to beneficiaries to sort through options and compare plans

In addition, pharmacies and other independent groups will also be conducting outreach to Medicare beneficiaries at events throughout the fall and winter. Local senior centers should have more information and schedules for these events..

The process of learning about and selecting the best drug plan option for each Medicare-eligible person will be complicated. We recognize this and are committed to monitoring the enrollment process to make sure seniors get accurate, straightforward information and assistance.

We believe that the new drug benefit represents a good first step in establishing quality drug coverage for seniors and disabled persons on Medicare. Improvements will need to be made and the benefit is not perfect, but it is a start and something we can work together to build upon. As always, we encourage you to contact us with any questions or concerns you may have about the program.